



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

01/12/2007

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:	NJD980761324
INSTALLATION NAME:	GOODWILL INDUSTRIES OF SOUTHERN NJ QUAKE
INSTALLATION ADDRESS :	7030 COLONIAL HWY PENNSAUKEN, NJ 08109-4306
MAILING ADDRESS :	2835 RTE 73 MAPLE SHADE, NJ 08052

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-3056**

**TO: GOODWILL INDUSTRIES OF SOUTHERN NJ QUAKE
or Current Occupant
ATTN: MARTIN ABELKOP
2835 RTE 73
MAPLE SHADE, NJ 08052**

SEND COMPLETED FORM TO:
The Appropriate State or EPA Regional Office.

United States Environmental Protection Agency



RCRA SUBTITLE C SITE IDENTIFICATION FORM

1. Reason for Submittal
(See instructions on page 13.)

MARK ALL BOX(ES) THAT APPLY

Reason for Submittal:

- ☒ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)
- ☐ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
- ☐ As a component of the Hazardous Waste Report

2. Site EPA ID Number
(page 14)

EPA ID Number

NJ, D, 9, 8, 0, 7, 6, 1, 3, 2, 4

3. Site Name
(page 14)

Name:

Goodwill Industries of Southern New Jersey Quaker City, Inc.

4. Site Location Information
(page 14)

Street Address: 7030 Colonial Hwy.

City, Town, or Village: Pennsauken

State: NJ

County Name: Camden

Zip Code: 08109

5. Site Land Type
(page 14)

Site Land Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

6. North American Industry Classification System (NAICS) Code(s) for the Site
(page 14)

A.

18 13 3 1 (SIC#)

B.

1 1 1 1 1 1 1 1

C.

1 1 1 1 1 1 1 1

D.

1 1 1 1 1 1 1 1

7. Site Mailing Address
(page 15)

Street or P. O. Box: 2835 Route 73

City, Town, or Village: Maple Shade

State: NJ

Country: USA

Zip Code: 08052

8. Site Contact Person
(page 15)

First Name: Martin

MI: I

Last Name: Abelkop

Phone Number: (856) 439-0200

Extension: 233

Email address: mabelkop@goodwillnj.org

9. Operator and Legal Owner of the Site
(pages 15 and 16)

A. Name of Site's Operator:

Goodwill Industries of S. NJ Quaker

Date Became Operator (mm/dd/yyyy): 03/20/03

Operator Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

B. Name of Site's Legal Owner:

Steven Bloom

Date Became Owner (mm/dd/yyyy):

Unknown

Owner Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

9. Legal Owner (Continued) Address	Street or P. O. Box: 1300 Route 73, Ste. # 106	
	City, Town, or Village: Mt. Laurel	
	State: NJ	
	Country: USA	Zip Code: 08054

10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

Y ☒ N ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

- ☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
- ☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
- ☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☐ d. United States Importer of Hazardous WasteY ☐ N ☐ e. Mixed Waste (hazardous and radioactive) GeneratorY ☐ N ☒ 2. Transporter of Hazardous WasteY ☐ N ☒ 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.Y ☐ N ☒ 4. Recycler of Hazardous Waste (at your site)Y ☐ N ☒ 5. Exempt Boiler and/or Industrial Furnace If "Yes", mark each that applies.

- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining

Y ☐ N ☒ 6. Underground Injection Control

B. Universal Waste Activities

Y ☒ N ☐ 1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste mark all boxes that apply:

- | | <u>Manage</u> |
|-------------------------------------|-------------------------------------|
| a. Batteries | <input type="checkbox"/> |
| b. Pesticides | <input type="checkbox"/> |
| c. Mercury containing equipment | <input type="checkbox"/> |
| d. Lamps | <input type="checkbox"/> |
| e. Other (specify) <u>Computers</u> | <input checked="" type="checkbox"/> |
| f. Other (specify) <u>Monitors</u> | <input checked="" type="checkbox"/> |
| g. Other (specify) <u>Printers</u> | <input checked="" type="checkbox"/> |

Y ☐ N ☐ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

Y ☐ N ☒ 1. Used Oil Transporter If "Yes", mark each that applies.

- ☐ a. Transporter
- ☐ b. Transfer Facility

Y ☐ N ☒ 2. Used Oil Processor and/or Re-refiner If "Yes", mark each that applies.

- ☐ a. Processor
- ☐ b. Re-refiner

Y ☐ N ☒ 3. Off-Specification Used Oil BurnerY ☐ N ☒ 4. Used Oil Fuel Marketer

- If "Yes", mark each that applies.
- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 21.)						
A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed. <i>possible lead from CRT/Monitor disassembly</i>						
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.						
12. Comments (See instructions on page 21.)						
13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)						
Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)					Date Signed (mm/dd/yyyy)
<i>Martin Abelkop</i>	Martin Abelkop, CTO					12/12/06

Goodwill

Southern New Jersey

Web Site: www.goodwillnj.org

2835 Route 73
Maple Shade, NJ 08052



(856) 439-0200 (voice)
(856) 866-1689 (fax)

December 12, 2006

Ms. Betsy Lopez
USEPA Region II
DEPP-RPB, RCRA Notifications
290 Broadway, 22nd Floor
New York, NY 10007-1866

Dear Ms. Lopez:

First let me thank you for taking the time to talk with me and walk me through the proper filing of EPA Form 8700-12, a copy of which is attached.

After our phone conversation two issues arose and I have taken my best guess as to the proper answer on the form. In part # 6 the form asks for a "NAICS" code, but no one at our organization knew what it was. The only thing our accounting department could come up with was the "SIC" number and that is what I used. If this is not correct then please contact us and we will attempt to research this further. The other issue is what codes to use in part # 11. After further reading our best guess was that since we do not handle any Hazardous Waste in any fashion, then the best response was to leave it blank. Again if we were incorrect then we will gladly adjust per your guidance.

Again thank you for your attention to this matter and please feel free to contact us at any time if anything further is required to get our EPA ID Number.

Yours truly,

Martin I. Abelkop
Chief Technology Officer

Our Business Works – So People Can

Accredited by CARF

Commission on Accreditation of Rehabilitation Facilities



RCRA Site Detail

Report run on: January 3, 2007 - 2:12 PM

Page 3

NJD980761324 PRESTIGE GRAPHICS

EPA Region 02 Extract Flag: Y Facility Identifier: County: CAMDEN

Basic Notes: EXTRACT_FLAG UPDATED OCT 2003 VIA SQL

Universes Generator: N Transporter: N Active: N
Operating TSDF: ----- IC In Place: N EI Indicator (HE / GW): N / N

Activity Location: NJ Source Type: Implementer Seq. Number: 1 Receive Date: 08 JUL 1999

Other/Previous Site Name: PRESTIGE GRAPHICS

Location 7030 COLONIAL HWY
Address: PENNSAUKEN, NJ 08109-4306

Mailing 7030 COLONIAL HWY
Address: PENNSAUKEN, NJ 08109

Land Type: Private Non Notifier: No Commercial Availability: Other - U Tsd Date:
Accessibility: No. Employees: State District: SOUTHERN

Notes: Update 10/03 to ensure Leg_Dist is associated with correct Counties

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Not a Generator; State: HQ-N Not a Generator

Transfer Facility: Unknown

Used Oil Activities

Other Hazardous Waste Generator Activities

Used Oil Transporter Activity

Off-Specification Used Oil Burner: No

Importer Activity: Unknown
Mixed Waste Generator: Unknown

Transporter: No
Transfer Facility: No

Used Oil Fuel Marketer Activity

Transporter Activity: No

Used Oil Processor and/or
Re-refiner Activity

Marketer who directs shipment
off-specification used oil to
off-specification used oil burner: No

TSD Activity: No

Processor: No
Refiner: No

Marketer who first claims the used
oil meets the specifications: No

Recycler Activity: No

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown
Smelting, melting, Refining Furnace
Exemption: Unknown

Underground
Injection Control: No

Destination Facility for
Universal Waste:

Activity Location: NJ Source Type: Notification Seq. Number: 1 Receive Date: 18 FEB 1998

Other/Previous Site Name: PRESTIGE GRAPHICS

Location 7030 COLONIAL HWY
Address: PENNSAUKEN, NJ 08109-4306

Mailing 7030 COLONIAL HWY
Address: PENNSAUKEN, NJ 08109

Contact Person WILLIAM BRETT 7030 COLONIAL HWY
For Source (809) 633-8394 PENNSAUKEN, NJ 08109
Information

Owner (current) 7030 COLONIAL HWY
MARK DRUM PENNSAUKEN, NJ 08109
From: To:

Type: Private
Phone: (609) 665-0600

Land Type: Private Non Notifier: No Commercial Availability: Other - U Tsd Date:
Accessibility: No. Employees: State District: SOUTHERN

Notes: Update 10/03 to ensure Leg_Dist is associated with correct Counties

RCRA Site Detail

Report run on: January 3, 2007 - 2:12 PM

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NJD980761324 PRESTIGE GRAPHICS

Continued...

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Small Quantity Generator; State:

Transfer Facility: Unknown

Other Hazardous Waste Generator Activities

Importer Activity: Unknown
Mixed Waste Generator: Unknown

Transporter Activity: No

TSD Activity: No

Recycler Activity: No

Exempt Boiler and/or Industrial Furnace

Small Quantity Onsite Burner Exemption: Unknown
Smelting, melting, Refining Furnace
Exemption: Unknown

Used Oil Activities

Used Oil Transporter Activity Off-Specification Used Oil Burner: No

Transporter: No
Transfer Facility: No

Used Oil Fuel Marketer Activity

Used Oil Processor and/or
Re-refiner Activity

Marketer who directs shipment
off-specification used oil to
off-specification used oil burner: No

Processor: No
Refiner: No

Marketer who first claims the used
oil meets the specifications: No

Underground
Injection Control: No

Destination Facility for
Universal Waste:

Description of Hazardous Wastes (as reported on Site Identification Form)

EPA Waste Codes: D001, X001

* End of Report *

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED
(yr., mo., & day)

F NJD980761324

T/A C
1 1

A

830912

I. NAME OF INSTALLATION

FRANKLIN COMPUTER CORP

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 2128 RT38

CITY OR TOWN

ST.

ZIP CODE

4 CHERRYHILL 1

NJ 08002

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 7030 COLONIAL HIGHWAY

CITY OR TOWN

ST.

ZIP CODE

6 PENNSAUKEN

NJ 08002

Camden 607

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 DEFOREST, JAMES FACILITIES mgr.

609-488-1110

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 PRIVATELY HELD CORP NUMEROUS OWNERS

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F = FEDERAL
M = NON-FEDERAL

M

A. GENERATION

B. TRANSPORTATION (complete item VII)

C. TREAT/STORE/DISPOSE

D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

A. AIR

B. RAIL

X C. HIGHWAY

D. WATER

E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

X A. FIRST NOTIFICATION

B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1		2		3		4		5		6	
X	002										
23	- 26	23	- 26	23	- 26	23	- 26	23	- 26	23	- 26
7		8		9		10		11		12	
23	- 26	23	- 26	23	- 26	23	- 26	23	- 26	23	- 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

	13		14		15		16		17		18
	23	-	26		23	-	26		23	-	26
	19		20		21		22		23		24
	23	-	26		23	-	26		23	-	26
	25		26		27		28		29		30
	23	-	26		23	-	26		23	-	26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31						32						33						34						35						36		
23 - 26						23 - 26						23 - 26						23 - 26						23 - 26						23 - 26		
37						38						39						40						41						42		
23 - 26						23 - 26						23 - 26						23 - 26						23 - 26						23 - 26		
43						44						45						46						47						48		
23 - 26						23 - 26						23 - 26						23 - 26						23 - 26						23 - 26		

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

	49		50		51		52		53		54	
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26	

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

- ☒ 1. IGNITABLE
(D001)

- ☐ 2. CORROSIVE
(D002)

- ☐ 3. REACTIVE
(D003)

- ☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE (<i>type or print</i>)	DATE SIGNED
James DeForrest	James DeForrest Facilities Manager	8/24/83

SEP 12 11 02 AM '83
PERMITS ADMIN BRANCH
NEW YORK, N.Y. 10007
ENVIRONMENTAL PROTECTION
AGENCY

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. First Notification☐ B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number

NJ D 980761324

II. Name of Installation (Include company and specific site name)

PRESTIGE GRAPHICS

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

7030 COLONIAL HIGHWAY

Street (Continued)

City or Town

PENNSAUKEN

State

NJ

Zip Code

08109-

County Code

County Name

CAMDEN

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

SAME AS ABOVE

City or Town

State

Zip Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

BRETT

(First)

WILLIAM

Job Title

Phone Number (Area Code and Number)

800-633-8394

VI. Installation Contact Address (See Instructions)

A. Contact Address

Location Mailing Other

☒ ☒ ☐

B. Street or P.O. Box

City or Town

State

Zip Code

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

MARK DRUM

Street, P.O. Box, or Route Number

7030 COLONIAL HWY

City or Town

PENNSAUKEN

State

NJ

Zip Code

08109-

Phone Number (Area Code and Number)

609-665-0600

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

No

(Date Changed)

Month

Day

Year

Per Stephanie
2/19/98 908 874 7888

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity		B. Used Oil Recycling Activities
<p>1. Generator (See Instructions)</p> <p><input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.)</p> <p><input checked="" type="checkbox"/> b. 100 to 1000 kg/mo (200-2,200 lbs.)</p> <p><input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)</p> <p>2. Transporter (Indicate Mode in boxes 1-5 below)</p> <p><input type="checkbox"/> a. For own waste only</p> <p><input type="checkbox"/> b. For commercial purposes</p> <p>Mode of Transportation</p> <p><input type="checkbox"/> 1. Air</p> <p><input type="checkbox"/> 2. Rail</p> <p><input type="checkbox"/> 3. Highway</p> <p><input type="checkbox"/> 4. Water</p> <p><input type="checkbox"/> 5. Other - specify _____</p>	<p><input type="checkbox"/> 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see Instructions.</p> <p>4. Hazardous Waste Fuel</p> <p><input type="checkbox"/> a. Generator Marketing to Burner</p> <p><input type="checkbox"/> b. Other Marketers</p> <p><input type="checkbox"/> c. Boiler and/or Industrial Furnace</p> <p><input type="checkbox"/> 1. Smelter Refractor</p> <p><input type="checkbox"/> 2. Small Quantity Exemption</p> <p>Indicate Type of Combustion Device(s)</p> <p><input type="checkbox"/> 1. Utility Boiler</p> <p><input type="checkbox"/> 2. Industrial Boiler</p> <p><input type="checkbox"/> 3. Industrial Furnace</p> <p><input type="checkbox"/> 5. Underground Injection Control</p>	<p>1. Used Oil Fuel Marketer</p> <p><input type="checkbox"/> a. Marketer Directs Shipment of Used Oil to Off-Specification Burner</p> <p><input type="checkbox"/> b. Marketer Who First Claims the Used Oil Meets the Specifications</p> <p>2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)</p> <p><input type="checkbox"/> a. Utility Boiler</p> <p><input type="checkbox"/> b. Industrial Boiler</p> <p><input type="checkbox"/> c. Industrial Furnace</p> <p>3. Used Oil Transporter - Indicate Type(s) of Activity(ies)</p> <p><input type="checkbox"/> a. Transporter</p> <p><input type="checkbox"/> b. Transfer Facility</p> <p>4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)</p> <p><input type="checkbox"/> a. Process</p> <p><input type="checkbox"/> b. Re-refine</p>

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic (List specific EPA hazardous waste numbers for the toxicity characteristic constituent(s))
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature <i>Mark R. Drum</i>	Name and Official Title (Type or print) MARK DRUM VP. MANUFACTURING	Date Signed 2-17-98
----------------------------------	--	------------------------

XI. Comments

ONE TIME CLEANUP ONLY

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section II of the booklet for addresses.)



State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS WASTE MANAGEMENT

John J. Trela, Ph.D., Acting Director

401 East State St.

CN 028

Trenton, N.J. 08625

609 - 633 - 1408

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

P-592 171 822

Michael Strauge
Vice President
Franklin Computer Corporation
Route 73 & Haddonfield Rd.
Pennsauken, NJ 08109

JUL 29 1987

Dear Mr. Strauge:

RE: Delinquent Part A Permit Application, EPA ID NO. NJD 980 761 324

Pursuant to the Resources Conservation and Recovery Act (RCRA), 42 U.S.C. §6901, the United States Environmental Protection Agency (EPA) is charged with the regulation of hazardous wastes. On February 2, 1983, the State of New Jersey was granted interim authorization in accordance with Section 3006(c) of RCRA to operate its hazardous waste program in lieu of Phase I of the Federal hazardous waste program. The effect of this change was that generators, transporters, and owners and operators of hazardous waste management facilities in New Jersey will be subject to the State of New Jersey hazardous waste regulations (N.J.A.C. 7:26-1 et seq.) in lieu of the Federal hazardous waste program (40 CFR Part 260-263 and 265). N.J.A.C. 7:26-12.3 required all parties handling certain quantities of hazardous wastes to notify USEPA of their activity by August 18, 1980 as required by Section 3010 of RCRA. Pursuant to that requirement, you submitted to the EPA a notification as a hazardous waste treatment, storage and disposal (TSD) facility.

N.J.A.C. 7:26-12.3 required that all existing facilities file a Part A application for the facility in accordance with 40 CFR 122.22 by November 19, 1980. Compliance with the notification and application requirements is mandatory before a facility can achieve interim status hazardous waste authority. A facility which has not achieved interim status is not eligible to treat, store or dispose of hazardous waste. As of the date of this letter, information available to the New Jersey Department of Environmental Protection (NJDEP) indicates that no Part A application has been filed for the above referenced site and that no request for revision or withdrawal of your submittal notification as a TSD facility has been received by the NJDEP.

JUL 29 1987

I am requesting that you respond within twenty (20) days of the date of this letter and indicate your company's present status with regard to the treatment, storage and disposal of hazardous waste. If your company does not carry out the aforementioned activities, your response should include the rationale for why your company previously notified EPA that it was a TSD facility and why you now believe that your company does not treat, store or dispose of hazardous waste. Your response should be sent to the following address:

New Jersey Department of Environmental Protection
Division of Hazardous Waste Management
Bureau of Hazardous Waste Engineering
401 East State Street
Trenton, New Jersey 08625

Should you wish to discuss the status of your facility further, or the scope of activities regulated as hazardous waste TSD facilities under New Jersey regulations, you may contact my office at (609) 292-9880.

Very truly yours,



Ernest J. Kuhlwein, Jr.
Acting Chief
Bureau of Hazardous Waste Engineering

EP48/slw

cc: Barry Tornick, USEPA

DOCUMENT: DELINQUE
FOLDER: SLWMCB



State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS WASTE MANAGEMENT

John J. Trela, Ph.D., Acting Director
401 East State St.
CN 028
Trenton, N.J. 08625
609-633-1408

Michael Strange, Vice President
Franklin Computer Corporation
Route 73 & Haddonfield Road
Pennsauken, NJ 08109

AUG 20 1987

Dear Mr. Strange:

RE: Regulatory Status, EPA ID NO. NJD 980 761 324

The Bureau of Hazardous Waste Engineering acknowledges receipt of your submittal dated August 10, 1987 which was in response to the Department's letter dated July 29, 1987 re: Delinquent Part A Permit Application.

The Bureau has reviewed these documents and a report of the RCRA inspections that were conducted by DEP personnel on July 27 and 30, 1986 at the above mentioned site as well as at previous locations that were occupied by Franklin Computer Corporation (FCC). As a result of your submittal and these inspections, the Bureau has determined that your company does not now generate, treat, store, or dispose of hazardous wastes; and that previous activities may have been as a generator only.

Based on this Bureau's understanding of the aforementioned submittal and inspection report your company is excluded from regulation under N.J.A.C. 7:26-1.1 et seq.; and FCC will be removed from the list of facilities that treat, store, or dispose of hazardous wastes.

This written acknowledgement of the operating conditions of the above identified facility is based expressly on the review of the aforementioned letter and site inspections. This letter makes no claim as to the extent and physical condition of the actual hazardous waste activities occurring at the site mentioned above. To operate a hazardous waste facility without prior approval from the DEP is a violation of the Solid Waste Management Act N.J.S.A. 13:1E-1 et seq.

The issuance of this delisting letter by the Department does not indicate or imply, and should not be construed as a waiver of any requirements pursuant to the New Jersey Water Pollution Control Act, N.J.S.A. 58:10A-1 et seq. If your facility is in any of the regulated categories identified in the above cited regulations, you are hereby directed to apply for any and all permits necessary within 90 or 180 days (at the option of DWR) to the

Michael Strange

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Bureau of Ground Water Discharge Permits, CN 029, Trenton, New Jersey, 08625. Applications may be obtained by calling (609) 292-0424.

If you have any questions on this matter, please contact Philip Polios of my staff at (609) 292-9880.

Very truly yours,



Ernest J. Kuhlwein, Jr., Chief
Bureau of Hazardous Waste Engineering

EP48/lgk

c: Nancy Power, BM&IS
Barry Tornick, USEPA